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B 6 Summary (Official Form 6 - Summary) (12/13)

United States Bankruptcy Court District of South Carolina

In re	Ray Elloitt Diamond,		Case No	14-00555
	Tonya A. Diamond			
-		Debtors	Chapter	13
			-	

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	280,000.00		
B - Personal Property	Yes	4	20,203.00		
C - Property Claimed as Exempt	Yes	2			
D - Creditors Holding Secured Claims	Yes	1		257,335.03	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	3		5,870.76	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	3		11,914.18	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			5,707.65
J - Current Expenditures of Individual Debtor(s)	Yes	2			5,045.91
Total Number of Sheets of ALL Schedules		20			
	To	otal Assets	300,203.00		
			Total Liabilities	275,119.97	

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B 6 Summary (Official Form 6 - Summary) (12/13)

United States Bankruptcy Court District of South Carolina

In re	Ray Elloitt Diamond,		Case No.	14-00555
	Tonya A. Diamond			
_		Debtors	Chapter	13

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	3,370.76
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	3,370.76

State the following:

Average Income (from Schedule I, Line 12)	5,707.65
Average Expenses (from Schedule J, Line 22)	5,045.91
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	7,634.84

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	5,870.76	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		11,914.18
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		11,914.18

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B6A (Official Form 6A) (12/07)

In re	Ray Elloitt Diamond,	Case No	14-00555
	Tonya A. Diamond		

Debtors

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Current Value of Husband, Debtor's Interest in Wife, Nature of Debtor's Amount of Description and Location of Property Property, without Interest in Property Joint, or Secured Claim Deducting any Secured Claim or Exemption Community **DEBTOR'S RESIDENCE: 130 OSPREY NEST CT.,** Fee Simple Н 280,000.00 247,286.54

DEBTOR'S RESIDENCE: 130 OSPREY NEST CT.,
BLYTHEWOOD, SC 29016, RICHLAND COUNTY; (5)
BEDROOM (2.5) BATH BRICK-VENEER HOME;
TMS# (R17703-02-41), TAX APPRAISAL VALUE:
(\$292,600), SEE ATTACHED TAX APPRAISAL,
DEBTOR PURCHASED HOME IN 2002 FOR
(\$250,690), DEBTOR'S OPINION OF MARKET
VALUE: (\$280,000), BASIS: MARKET VALUE OF
SIMILARLY SITUATED PROPERTIES

Sub-Total > **280,000.00** (Total of this page)

Total > **280,000.00**

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

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B6B (Official Form 6B) (12/07)

In re	Ray Elloitt Diamond,	Case No	14-00555
	Tonya A. Diamond		

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	X			
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan,		ALLSOUTH FEDERAL CREDIT UNION: SAVINGS ACCOUNT# (3027)	н	600.00
	thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		BANK OF AMERICA: CHECKING ACCOUNT# (5535)	W	800.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	Household goods and furnishings, including audio, video, and computer equipment.		HOUSEHOLD GOODS: BEDS, CHAIRS, TABLES, CHAIRS, TELEVISIONS, PHONES	J	1,500.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.		ASSORTED BOOKS & PICTURES	J	100.00
6.	Wearing apparel.		CLOTHING: ASSORTED USED CLOTHING	J	300.00
7.	Furs and jewelry.		JEWELRY: ASSORTED JEWELRY & WATCHES	J	150.00
8.	Firearms and sports, photographic, and other hobby equipment.	X			
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		TERM LIFE INSURANCE: UNITED HEALTHCARE, 185 ASYLUM ST, HARTFORD, CT; DEATH BENEFIT: (\$10,000), CASH SURRENDER VALUE: (\$0)	Н	0.00
10.	Annuities. Itemize and name each issuer.	X			

Sub-Total >	3,450.00
(Total of this page)	

³ continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Ray Elloitt Diamond,	Case No.	14-00555
	Tonya A. Diamond		

Debtors

SCHEDULE B - PERSONAL PROPERTY

			(Continuation Sheet)		
7	Гуре of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
defined i under a as define Give par record(s)	in an education IRA as in 26 U.S.C. § 530(b)(1) or qualified State tuition plan ed in 26 U.S.C. § 529(b)(1). rticulars. (File separately the) of any such interest(s). C. § 521(c).)	х			
other per	in IRA, ERISA, Keogh, or nsion or profit sharing ive particulars.		RETIREMENT PROGRAM: ERISA QUALIFIED RETIREMENT PROGRAM: AXA EQUITABLE, 100 MADISON ST, STE 1000, SYRACUSE, NY 13202-2720; FACE VALUE OF PROGRAM: (\$500); PROGRAM CANNOT BE ENTERED INTO WITHOUT SUBSTANTIAL PENALTY PRIOR TO RETIREMENT AGE	н	500.00
	nd interests in incorporated accorporated businesses.	X			
	in partnerships or joint . Itemize.	X			
and othe	nent and corporate bonds or negotiable and otiable instruments.	X			
16. Account	s receivable.	X			
property	y, maintenance, support, and settlements to which the s or may be entitled. Give ars.	X			
	quidated debts owed to debtor g tax refunds. Give particulars.	X			
estates, a exercisal debtor o	e or future interests, life and rights or powers ble for the benefit of the ther than those listed in e A - Real Property.	X			
interests	ent and noncontingent in estate of a decedent, enefit plan, life insurance or trust.	X			
			(Total	Sub-Total of this page)	al > 500.00

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Ray Elloitt Diamond,
	Tonya A Diamond

Case No. **14-00555**

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	(4) DO	NFINITI QX56: VIN# (5N3AA08D68N901206), OR, () CYLINDER, (112,000) MILES, KELLEY BOOK VALUE: (\$13,523)	W	13,523.00
		(3VWD	OLKSWAGON BEETLE: VIN# DD21C9XM475967), (2) DOOR, (4) CYLINDER, DO) MILES, KELLEY BLUE BOOK VALUE:	н	730.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.		S OF TRADE: ASSORTED HAND TOOLS S OF TRADE: UNIFORMS	H W	1,500.00 500.00
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
			(Total	Sub-Tota of this page)	al > 16,253.00

Sheet <u>2</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Ray Elloitt Diamond,	Case No	14-00555
	Tonya A. Diamond		

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > 0.00 (Total of this page)

Total >

20,203.00

Sheet <u>3</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

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B6C (Official Form 6C) (4/13)

In re Ray Elloitt Diamond, Case No. 14-00555
Tonya A. Diamond

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled und (Check one box) ☐ 11 U.S.C. §522(b)(2) ☐ 11 U.S.C. §522(b)(3)	\$155,675. (Amount	☐ Check if debtor claims a homestead exemption that exceeds \$155,675. (Amount subject to adjustment on 4/1/16, and every three years there with respect to cases commenced on or after the date of adjustment.				
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption			
Real Property DEBTOR'S RESIDENCE: 130 OSPREY NEST CT., BLYTHEWOOD, SC 29016, RICHLAND COUNTY; (5) BEDROOM (2.5) BATH BRICK-VENEER HOME; TMS# (R17703-02-41), TAX APPRAISAL VALUE: (\$292,600), SEE ATTACHED TAX APPRAISAL, DEBTOR PURCHASED HOME IN 2002 FOR (\$250,690), DEBTOR'S OPINION OF MARKET VALUE: (\$280,000), BASIS: MARKET VALUE OF SIMILARLY SITUATED PROPERTIES	S.C. Code Ann. § 15-41-30(A)(1)	50,000.00 280,000.0				
ACCOUNT# (3027)	tificates of Deposit S.C. Code Ann. § 15-41-30(A)(7) for inused portion of Homestead exemption	600.00	600.00			
(5535) u	S.C. Code Ann. § 15-41-30(A)(7) for inused portion of Homestead exemption	800.00	800.00			
Household Goods and Furnishings HOUSEHOLD GOODS: BEDS, CHAIRS, TABLES, S CHAIRS, TELEVISIONS, PHONES	S.C. Code Ann. § 15-41-30(A)(3)	1,500.00	1,500.00			
Books, Pictures and Other Art Objects; Collectibles ASSORTED BOOKS & PICTURES	S.C. Code Ann. § 15-41-30(A)(3)	100.00	100.00			
Wearing Apparel CLOTHING: ASSORTED USED CLOTHING	S.C. Code Ann. § 15-41-30(A)(3)	300.00	300.00			
Furs and Jewelry JEWELRY: ASSORTED JEWELRY & WATCHES S	S.C. Code Ann. § 15-41-30(A)(4)	150.00	150.00			
Interests in Insurance Policies TERM LIFE INSURANCE: UNITED SHEALTHCARE, 185 ASYLUM ST, HARTFORD, CT; DEATH BENEFIT: (\$10,000), CASH SURRENDER VALUE: (\$0)	S.C. Code Ann. § 38-63-40(A)	0.00	0.00			
Interests in IRA, ERISA, Keogh, or Other Pension or FRETIREMENT PROGRAM: ERISA QUALIFIED SRETIREMENT PROGRAM: AXA EQUITABLE, 100 MADISON ST, STE 1000, SYRACUSE, NY 13202-2720; FACE VALUE OF PROGRAM: (\$500); PROGRAM CANNOT BE ENTERED INTO WITHOUT SUBSTANTIAL PENALTY PRIOR TO RETIREMENT AGE	Profit Sharing Plans 5.C. Code Ann. § 15-41-30(A)(14)	500.00	500.00			

¹ continuation sheets attached to Schedule of Property Claimed as Exempt

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B6C (Official Form 6C) (4/13) -- Cont.

In re	Ray Elloitt Diamond,	Case No	14-00555
	Tonya A Diamond		

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

(Continuation Sheet)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Automobiles, Trucks, Trailers, and Other Vehicles 2008 INFINITI QX56: VIN# (5N3AA08D68N901206), (4) DOOR, () CYLINDER, (112,000) MILES, KELLEY BLUE BOOK VALUE: (\$13,523)	S.C. Code Ann. § 15-41-30(A)(2)	5,625.00	13,523.00
1999 VOLKSWAGON BEETLE: VIN# (3VWDD21C9XM475967), (2) DOOR, (4) CYLINDER, (212,000) MILES, KELLEY BLUE BOOK VALUE: (\$730)	S.C. Code Ann. § 15-41-30(A)(2)	5,625.00	730.00
Machinery, Fixtures, Equipment and Supplies Used TOOLS OF TRADE: ASSORTED HAND TOOLS	<u>l in Business</u> S.C. Code Ann. § 15-41-30(A)(6)	1,675.00	1,500.00
TOOLS OF TRADE: UNIFORMS	S.C. Code Ann. § 15-41-30(A)(6)	500.00	500.00

Total: 67,375.00 300,203.00

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B6D (Official Form 6D) (12/07)

In re	Ray Elloitt Diamond,
	Tonya A. Diamond

Case No.	14-00555	

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	A H	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	C O N T I N G E N	LIQUI	S	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. 2666			2008	T	D A T E D			
CHASE PO BOX 5210 New Hyde Park, NY 11042		w	AUTO LOAN 2008 INFINITI QX56: TO BE PAID IN PLAN					
			Value \$ 13,523.00				10,048.49	0.00
PALMETTO HEALTH ALLIANCE PO BOX 364 Columbia, SC 29202		J	Judgment Lien DEBTOR'S RESIDENCE: 130 OSPREY NEST CT., BLYTHEWOOD, SC 29016: 522(f) VOIDABLE					
			Value \$ 280,000.00	1			60,286.54	0.00
Account No. 3880 SPECIALIZED LOAN SERVICES 8742 LUCENT BLVD SUITE 300 Littleton, CO 80129		J	11/2002 Mortgage DEBTOR'S RESIDENCE: 130 OSPREY NEST CT., BLYTHEWOOD, SC 29016: ARREARS TO BE PAID IN PLAN (\$17,000), DEBTOR TO RESUME PAYMENTS MARCH 2014					
			Value \$ 280,000.00	L			187,000.00	0.00
Account No.			Value \$					
continuation sheets attached			(Total of	Sub			257,335.03	0.00
			(Report on Summary of So	_	ota lule	- I	257,335.03	0.00

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B6E (Official Form 6E) (4/13)

In re	Ray Elloitt Diamond,		Case No.	14-00555
	Tonya A. Diamond			
-		Debtors		

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box la "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.
Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to prior listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report th total also on the Statistical Summary of Certain Liabilities and Related Data.
☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible related of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. \S 507(a)(3).
■ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sal representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
■ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Feder Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or

another substance. 11 U.S.C. § 507(a)(10).

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6E (Official Form 6E) (4/13) - Cont.

In re	Ray Elloitt Diamond,		Case No	14-00555
	Tonya A. Diamond			
_		Debtors		

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Wages, salaries, and commissions

							TYPE OF PRIORITY	
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Hu Hu	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	COXFLXGEXF	U U	E	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY AMOUNT ENTITLED TO PRIORITY
Account No.			ATTORNEYS FEE	Ť	D A T E D			
MOSS & ASSOCIATES, ATTORNEYS, P.A. 816 ELMWOOD AVENUE Columbia, SC 29201		J					2,500.00	2,500.00
Account No.	╁			+	\vdash		2,500.00	2,500.00
Account No.								
Account No.				T				
Account No.								
Sheet 1 of 2 continuation sheets att	ache	d to)	Sub				0.00
Schedule of Creditors Holding Unsecured Pri				this	pag	ge)	2,500.00	2,500.00

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B6E (Official Form 6E) (4/13) - Cont.

In re	Ray Elloitt Diamond,		Case No	14-00555
	Tonya A. Diamond			
_		Debtors		

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY CODEBTOR Husband, Wife, Joint, or Community UNLIQUIDATED AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ONTINGENT S P U T E D AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C AND ACCOUNT NUMBER (See instructions.) Account No. 9287 2010 **Federal Income Taxes IRS** 0.00 **PO BOX 7346** Philadelphia, PA 19101-7346 J 2,870.76 2,870.76 Account No. 9287 2012 State Taxes SC DEPT OF REVENUE 0.00 **PO BOX 12265** Columbia, SC 29211 500.00 500.00 Account No. Account No. Account No. Subtotal 0.00 Sheet **2** of **2** continuation sheets attached to (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 3,370.76 3,370.76 Total 0.00 (Report on Summary of Schedules) 5,870.76 5,870.76 Case 14-00555-jw Doc 9 Filed 02/21/14 Entered 02/21/14 22:37:45 Desc Main Document Page 14 of 38

B6F (Official Form 6F) (12/07)

In re	Ray Elloitt Diamond,		Case No.	14-00555
	Tonya A. Diamond			
		Debtors		

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME,	С	Нι	sband, Wife, Joint, or Community	С	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	J H W	DATE CLAIM WAS INCURRED AND	ONTINGEN	L Q U	S P U T F	AMOUNT OF CLAIM
Account No. 4484			2009	T	ΙT		
ANDERSON FINANCIAL NETWORK PO BOX 3097 Bloomington, IL 61702		J	Collections		ED		898.00
Account No. 4257	\dashv		2010		+	+	
CREDIT ONE BANK PO BOX 98873 Las Vegas, NV 89193		J	Credit card purchases				200.00
Account No. 2545 FOCUSED RECOVERY SOLUTIONS 9701 METROPOLITAN COURT SUITE B Richmond, VA 23236		w	2008 Collections				
1.101.1							960.00
Account No. 3001 IC SYSTEMS PO BOX 64378 Saint Paul, MN 55164		w	2008 Collections				533.00
_2 continuation sheets attached			(Total o	Sub			2,591.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Ray Elloitt Diamond,	Case No 14-00555
	Tonya A. Diamond	<u>.</u>

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDAT	DISPUTED	:	AMOUNT OF CLAIM
Account No. 6001 IC SYSTEMS PO BOX 64378 Saint Paul, MN 55164		w	2011 Collections	T	T E D			52.00
Account No. 9287 IRS PO BOX 7346 Philadelphia, PA 19101-7346		J	Unsecured Federal Income Taxes					82.18
Account No. 5099 NORTH STATE ACCEPTANCE 3501 MARKET ST Wilmington, NC 28403		J	12/2011 Repossession Deficiency - 2006 NISSAN TITAN					5,242.00
Account No. 2797 PALMETTO IMAGING 2651 WARRENVILLE RD STE 5 Downers Grove, IL 60515-5544		J	04/2010 Medical Bills					155.00
Account No. 282 PROFESSIONAL PATHOLOGY 300 EAST ARLINGTON BLVD Greenville, NC 27834	-	J	2013 Collections					291.00
Sheet no1 of _2 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	Subt			,	5,822.18

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B6F (Official Form 6F) (12/07) - Cont.

In re	Ray Elloitt Diamond,	Case No. <u>14-00555</u>
	Tonya A. Diamond	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME,	0	Hu	sband, Wife, Joint, or Community	C O N T	UNLI	D I	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	E B T	H & J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	INGEN	Iυ	D I S P U T E D	AMOUNT OF CLAIM
Account No. 216			2012	Т	A T E D		
RECEIVABLES MANAGEMENT 1601 SHOP RD STE D Columbia, SC 29201		J	Collections - PALMETTO RICHLAND		D		1,925.00
Account No. 0664			2013				
RECEIVABLES MANAGEMENT 1601 SHOP RD STE D Columbia, SC 29201		W	Collections				
							1,270.00
Account No.			NOTICE ONLY				
RICHLAND COUNTY PO BOX 11947 Columbia, SC 29211		J					
							0.00
Account No.			NOTICE ONLY				
SC DEPT OF REVENUE PO BOX 12265 Columbia, SC 29211		J					
							0.00
Account No. 9484			2008				
SENICK, MATTHEWS, BROWN 109 EDGEBROOK DRIVE Anderson, SC 29621		W	Collections				
							306.00
Sheet no. 2 of 2 sheets attached to Schedule of	Ш		<u>. </u>	Sub	tota	1	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				3,501.00
			(Report on Summary of So		Tota dule		11,914.18

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B6G (Official Form 6G) (12/07)

In re	Ray Elloitt Diamond,	Case No	No. <u>14-00555</u>	
	Tonya A. Diamond			

Debtors

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 14-00555-jw Doc 9 Filed 02/21/14 Entered 02/21/14 22:37:45 Desc Main Document Page 18 of 38

B6H (Official Form 6H) (12/07)

In re	Ray Elloitt Diamond,	Case No	14-00555
	Tonya A. Diamond		

Debtors

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

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Fill in this information	to identify your case:	
Debtor 1	Ray Elloitt Diamond	
Debtor 2 (Spouse, if filing)	Tonya A. Diamond	
United States Bankru	ptcy Court for the: DISTRICT OF SOUTH CAROLINA	
	-00555	Check if this is:
(If known)		☐ An amended filing ☐ A supplement showing post-petition chapter 13 income as of the following date:
Official Form	n B 6I	MM / DD/ YYYY

Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job,	Employment status	■ Employed	■ Employed
attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
employers.	Occupation	MECHANIC	REGISTERED NURSE
Include part-time, seasonal, or self-employed work.	Employer's name	FLEETGUARD MAINTENANCE	NORTH MAIN KIDNEY CENTER
Occupation may include student or homemaker, if it applies.	Employer's address	1044 MARKET ST Columbia, SC 29201	500 CUMMINGS CENTER STE 6550 Beverly, MA 01915

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 3,575.00 4,059.84 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 0.00 3. Calculate gross Income. Add line 2 + line 3. 3,575.00 4,059.84

Official Form B 6I Schedule I: Your Income page 1

Debtor 1 Debtor 2			C	ase nu	ımber (<i>if know</i> ı	n) <u> </u>	14-00	555	
C	opy line 4 here	4.	_	For D	ebtor 1 3,575.0	_		Debtor 2 or filing spouse 4,059.84	
			•		3,373.0	<u> </u>	Ψ	4,000.0-	<u>*</u>
	ist all payroll deductions:	_				_			_
5a	· · · · · · · · · · · · · · · · · · ·	5a		<u> </u>	889.5	_	\$	456.37	_
5k 5d	·	5b 5c		<u> </u>	0.0	_	\$ <u></u>	0.00	
50		5d		P	0.0	_	\$ 	0.00	_
5e		5e		<u> </u>	0.0	_	\$	185.8	_
5f		5f.		·	0.0	_	\$	0.00	
50		5g	. ;	<u> </u>	0.0		\$	0.00	
5h	n. Other deductions. Specify: RETIREMENT	5h	.+ 3	<u> </u>	178.7		\$	0.00	_
	EMPLOYEE LOAN (\$100 BI/WEEKLY - BALANCE: \$1,700)		;	B	216.6	7	\$	0.00)
6. A	dd the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	9	·	1,284.9	7	\$	642.22	2_
7. C	alculate total monthly take-home pay. Subtract line 6 from line 4.	7.	9	;	2,290.0	3	\$	3,417.62	2_
8. Li 8a	ist all other income regularly received: a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
	monthly net income.	8a		<u> </u>	0.0		\$	0.00	
8k		8b	. ;	§	0.0	0	\$	0.00	<u>) </u>
80	Family support payments that you, a non-filing spouse, or a dependence regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	e nt 8c	. ;	6	0.0	0	\$	0.00	1
80		8d		<u> </u>	0.0		\$	0.00	
86		8e	. :	<u> </u>	0.0	_	\$	0.00	
8f	Include cash assistance and the value (if known) of any non-cash assistanthat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		5	0.0		\$	0.00	<u> </u>
80		8g		§	0.0		\$	0.00	_
8h	n. Other monthly income. Specify:	8h	.+ 3	<u> </u>	0.0	<u>0</u> +	\$	0.00	<u>) </u>
9. A	dd all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0.0	0	\$	0.0	00
10. C a	alculate monthly income. Add line 7 + line 9.	10.	\$	2.	290.03 +	\$	3.4	17.62 = \$	5,707.65
Ad	dd the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		_			_			,
In ot De	tate all other regular contributions to the expenses that you list in Scheduclude contributions from an unmarried partner, members of your household, you ther friends or relatives. o not include any amounts already included in lines 2-10 or amounts that are repecify:	our depe						chedule J. 11. +\$	0.00
W	dd the amount in the last column of line 10 to the amount in line 11. The tritle that amount on the Summary of Schedules and Statistical Summary of Copplies							12. \$	5,707.65
_	o you expect an increase or decrease within the year after you file this fo	rm?						Comb month	ined ily income
_									
	Yes. Explain: DEBTOR IS PAID A GROSS BI-WEEKLY SALAI MAINTENANCE.	RY OF	\$ 1,	6 50 T	THROUGH	1 FL	EET (GUARD	
	SPOUSE'S INCOME ABOVE REFLECTS AN AV REFLECTION OF SPOUSE'S MONTHLY INCOM		ΕO	F 20	13 YTD AS	S TI	HIS IS	A BETTER	

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Fill	in this information to identify	your case:				
Del	otor 1 Ray Elloit	t Diamond		Check if	this is:	
	otor 2 Tonya A.			☐ A su	mended filing pplement showing nses as of the follo	post-petition chapter 13
` 1	ited States Bankruptcy Court f	for the: DISTRICT OF SOUTH CAROL	INIA		M / DD / YYYY	———
		of the: DISTRICT OF SOUTH CAROL	IIVA	IVIN	M/UU/1111	
	se number 14-00555 known)				parate filing for Do ntains a separate ho	ebtor 2 because Debtor 2 busehold
O	fficial Form B 6J					
So	chedule J: Your	– Expenses				12/1
Be infe	as complete and accurate as	possible. If two married people are filingeded, attach another sheet to this form.				correct
Par		sehold				
1.	Is this a joint case?					
	☐ No. Go to line 2. ☐ Yes. Does Debtor 2 live	a in a caparata haucahald?				
	■ No	nust file a separate Schedule J.				
2.	Do you have dependents?	_				
۷.		□ No				
	Do not list Debtor 1 and Debtor 2.	■ Yes. Fill out this information for each dependent	Dependent's relationshi Debtor 1 or Debtor 2	p to	Dependent's age	Does dependent live with you?
	Do not state the dependents names.		SON		6	□ No ■ Yes
			DAUGHTER		15	□ No ■ Yes
						□ No
						☐ Yes ☐ No
						☐ Yes
3.	Do your expenses include expenses of people other t yourself and your depende					
Par	t 2: Estimate Your Ong	oing Monthly Expenses				
exp		our bankruptcy filing date unless you are pankruptcy is filed. If this is a supplemen				
		non-cash government assistance if you k led it on <i>Schedule I: Your Income</i> (Officia			Your expo	enses
4.	The rental or home owner and any rent for the ground	ship expenses for your residence. Include or lot.	e first mortgage payments	4. \$ _		1,295.00
	If not included in line 4:					
	4a. Real estate taxes			4a. \$		0.00
		r's, or renter's insurance		4b. \$		0.00
		repair, and upkeep expenses		4c. \$ _		50.00
	4d. Homeowner's associ	ation or condominium dues		4d. \$		13.00

0.00

Additional mortgage payments for your residence, such as home equity loans

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	Elloitt Diamond ya A. Diamond	Case numb	er (if known)	14-00555
Utilities:				
	ricity, heat, natural gas	6a.	\$	350.00
6b. Wate	r, sewer, garbage collection		\$	60.00
6c. Telep	phone, cell phone, Internet, satellite, and cable services	6c.	\$	220.00
	r. Specify:		\$	0.00
Food and h	ousekeeping supplies	7.	\$	800.00
	nd children's education costs		\$	260.00
0,	undry, and dry cleaning		\$	200.00
	re products and services	10.	\$	60.00
Medical an	d dental expenses	11.	\$	120.00
_	tion. Include gas, maintenance, bus or train fare. de car payments.	12.	\$	650.00
	ent, clubs, recreation, newspapers, magazines, and books		\$	110.00
	contributions and religious donations		\$	390.83
Insurance.		±7.	T	330.03
	de insurance deducted from your pay or included in lines 4 or 20.			
	nsurance	15a.	\$	0.00
15b. Healt	h insurance	15b.	\$	0.00
15c. Vehic	cle insurance	15c.	\$	260.00
15d. Other	rinsurance. Specify:	15d.	\$	0.00
	ot include taxes deducted from your pay or included in lines 4 or 20. AUTO PROPERTY TAXES	16.	\$	71.25
	or lease payments:			
_	ayments for Vehicle 1	17a.	\$	0.00
	ayments for Vehicle 2	17b.		0.00
17c. Other		17c.	\$	0.00
17d. Other		17d.	\$	0.00
	ents of alimony, maintenance, and support that you did not report a		\$	0.00
	pay on line 5, Schedule I, Your Income (Official Form 6I). ments you make to support others who do not live with you.	10.	s	0.00
Specify:	ients you make to support others who do not live with you.	19.	Ψ	0.00
	property expenses not included in lines 4 or 5 of this form or on <i>Sch</i>		٠.	
	gages on other property	20a.		0.00
	estate taxes	20b.	\$	0.00
20c. Prope	erty, homeowner's, or renter's insurance	20c.	\$	0.00
-	tenance, repair, and upkeep expenses	20d.	· .	0.00
	eowner's association or condominium dues	20e.	\$	0.00
Other: Spec			+\$	33.33
•	BTOR'S PROFESSIONAL EXPENSE: UNIFORMS		+\$	100.00
	BTOR'S PROFESSIONAL EXPENSE: LICENSE(\$60		· -	
BI-ANNU			+\$	2.50
	nly expenses. Add lines 4 through 21.	22.	\$	5,045.91
	your monthly expenses.	L		
	our monthly net income.	22	ф	F 707 0F
	line 12 (your combined monthly income) from Schedule I.	23a.		5,707.65
23b. Copy	your monthly expenses from line 22 above.	23b.	-\$	5,045.91
	ract your monthly expenses from your monthly income.	22	•	661.74
The r	esult is your monthly net income.	23c.	\$	001.74

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

☐ Yes. Explain:

DEBTORS GAS EXPENSE IS HIGHER THAN AVERAGE AS DEBTOR DRIVES 27 MILES ONE WAY TO WORK / 5 DAYS A WEEK. JOINT DEBTOR DRIVES 20 MILES ONE WAY TO WORK / 3 DAYS A WEEK.

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B6 Declaration (Official Form 6 - Declaration). (12/07)

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United States Bankruptcy CourtDistrict of South Carolina

In re	Ray Elloitt Diamond Tonya A. Diamond		Case No.	14-00555	
		Debtor(s)	Chapter	13	

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

	I declare under penalty of perjury the sheets, and that they are true and correct to the sheets.		ad the foregoing summary and schedules, consisting of _y knowledge, information, and belief.	22
Date	February 21, 2014	Signature	/s/ Ray Elloitt Diamond Ray Elloitt Diamond Debtor	
Date	February 21, 2014	Signature	/s/ Tonya A. Diamond Tonya A. Diamond Joint Debtor	

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (04/13)

United States Bankruptcy Court District of South Carolina

In re	Ray Elloitt Diamond Tonya A. Diamond		Case No.	14-00555
		Debtor(s)	Chapter	13

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

Ν	one
-	_

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$11,831.04	2014 YTD: FLEET GUARD MAINTENANCE CENTER(DEBTOR) / NORTH MAIN KIDNEY CENTER(JOINT DEBTOR)
\$90,310.48	2013: FLEET GUARD MAINTENANCE CENTER(DEBTOR) / NORTH MAIN KIDNEY CENTER(JOINT DEBTOR)
\$86,974.00	2012: H&H SERVICE(DEBTOR) / FLEET GUARD MAINTENANCE CENTER(DEBTOR) / ADP TOTALSOURCE MI NM KIDNEY CENTER(JOINT DEBTOR)
\$68,032.00	2011: H&H SERVICE(DEBTOR) / BIO-MEDICAL APPLICATIONS OF SC(JOINT DEBTOR)/ ADP TOTALSOURCE MI NM KIDNEY CENTER(JOINT DEBTOR)

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2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE **\$0.00 2014 YTD: N/A**

\$1,880.00 2013: AXA EQUITABLE DISBURSEMENT(DEBTOR RECEIVED \$1,460 IN JULY

2013 AND USED TO PAY OFF DEBT) / TAX REFUND FOR TAX YEAR 2012

\$6,807.00 2012: AXA EQUITABLE DISBURSEMENT(DEBTOR) / TAX REFUND FOR TAX

YEAR 2011

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

11011

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL PAYMENTS AMOUNT PAID OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT
DATES OF PAID OR
PAYMENTS/ VALUE OF AMOUNT STILL
NAME AND ADDRESS OF CREDITOR TRANSFERS TRANSFERS OWING

None

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR DATE OF PAYMENT AMOUNT PAID OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT NATURE OF COURT OR AGENCY STATUS OR AND CASE NUMBER PROCEEDING AND LOCATION DISPOSITION

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not

filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE

BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

NORTH STATE ACCEPTANCE 3501 MARKET ST Wilmington, NC 28403 DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

06/2013

DESCRIPTION AND VALUE OF PROPERTY

2006 NISSAN TITAN - DEFICIENCY LISTED ON SCHEDULE F

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

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9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

MOSS & ASSOCIATES, ATTORNEYS P.A. 816 ELMWOOD AVENUE COLUMBIA, SC 29201 01/30/2014 ATTORNEY'S FEE: \$1,000.00 FILING FEE: \$281.00

CC ADVISING, INC. 730 WASHINGTON AVE. SUITE 230-D Bay City, MI 48708-5732 12/2013 PRE-FILING CREDIT COUNSELING: \$14

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

RANSFER(S) IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

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NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF NOTICE

ENVIRONMENTAL

LAW

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

ENVIRONMENTAL

NOTICE LAW

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which None

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

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18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS

BEGINNING AND ENDING DATES

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

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20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

..

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

21 . Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

None

ADDRESS

DATE OF WITHDRAWAL

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * * *

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date February 21, 2014

Signature /s/ Ray Elloitt Diamond
Ray Elloitt Diamond
Debtor

Date February 21, 2014

Signature /s/ Tonya A. Diamond
Tonya A. Diamond
Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B 22C (Official Form 22C) (Chapter 13) (04/13)

	Ray Ell	oitt Diamond	
In re	Tonya /	A. Diamond	
		Debtor(s)	
Case N	umber:	14-00555	
		(If known)	

According to the calculations required by this statement:
\square The applicable commitment period is 3 years.
■ The applicable commitment period is 5 years.
■ Disposable income is determined under § 1325(b)(3).
☐ Disposable income is not determined under § 1325(b)(3).
(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

nay com	olete one statement only.			
	Part I. REPORT OF INCOME			
1	Marital/filing status. Check the box that applies and complete the balance of this part of this s a. □ Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10.	ateme	ent as directed.	
	b. Married. Complete both Column A ("Debtor's Income") and Column B ("Spouse's In	come'	") for Lines 2-10	_
	All figures must reflect average monthly income received from all sources, derived during the s		Column A	Column B
	calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the		Debtor's	Spouse's
	six-month total by six, and enter the result on the appropriate line.		Income	Income
2	Gross wages, salary, tips, bonuses, overtime, commissions.	\$	3,575.00	\$ 4,059.84
3	Income from the operation of a business, profession, or farm. Subtract Line b from Line a a enter the difference in the appropriate column(s) of Line 3. If you operate more than one busine profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter number less than zero. Do not include any part of the business expenses entered on Line b a deduction in Part IV.	ss, a		
	Debtor Spouse			
	a. Gross receipts \$ 0.00 \$ 0.	_		
	b. Ordinary and necessary business expenses \$ 0.00 \$ 0.1		0.00	
	c. Business income Subtract Line b from Line a	\$	0.00	\$ 0.00
4	Rents and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. Do not enter a number less than zero. Do not include an part of the operating expenses entered on Line b as a deduction in Part IV.			
4	Debtor Spouse	10		
	b. Ordinary and necessary operating expenses \$ 0.00 \$ 0.0			
	c. Rent and other real property income Subtract Line b from Line a	\$	0.00	\$ 0.00
5	Interest, dividends, and royalties.	\$	0.00	\$ 0.00
6	Pension and retirement income.	\$	0.00	\$ 0.00
7	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B.	\$	0.00	\$ 0.00
8	Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8. However, if you contend that unemployment compensation received by you or your spouse was benefit under the Social Security Act, do not list the amount of such compensation in Column or B, but instead state the amount in the space below:			
	Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$ 0.00 Spouse \$ 0.00	00 \$	0.00	\$ 0.00

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B 22C (Official Form 22C) (Chapter 13) (04/13) **Income from all other sources.** Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include alimony or separate maintenance payments paid by your spouse, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or 9 payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism. Debtor Spouse \$ a. \$ 0.00 0.00 Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 10 3,575.00 4,059.84 in Column B. Enter the total(s). Total. If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter 11 7.634.84 the total. If Column B has not been completed, enter the amount from Line 10, Column A. Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PERIOD 12 **Enter the amount from Line 11** 7.634.84 Marital Adjustment. If you are married, but are not filing jointly with your spouse, AND if you contend that calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of your spouse, enter on Line 13 the amount of the income listed in Line 10. Column B that was NOT paid on a regular basis for the household expenses of you or your dependents and specify, in the lines below, the basis for excluding this income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments 13 on a separate page. If the conditions for entering this adjustment do not apply, enter zero. \$ \$ Total and enter on Line 13 0.00 14 Subtract Line 13 from Line 12 and enter the result. 7,634.84 Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the number 12 and 15 enter the result. 91,618.08 **Applicable median family income.** Enter the median family income for applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) 16 a. Enter debtor's state of residence: SC b. Enter debtor's household size: 62,490,00 Application of § 1325(b)(4). Check the applicable box and proceed as directed. ☐ The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commitment period is 3 years" at the 17 top of page 1 of this statement and continue with this statement. ■ The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commitment period is 5 years" at the top of page 1 of this statement and continue with this statement. Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSABLE INCOME 18 Enter the amount from Line 11. 7.634.84 Marital Adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 the total of any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income(such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a 19 separate page. If the conditions for entering this adjustment do not apply, enter zero. \$ \$ Total and enter on Line 19. 0.00

Current monthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter the result.

20

7,634.84

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21		alized current monthly income result.	ome for § 1325(b)(3). I	Multip	oly the amount from Line	20 by the number 12 and	\$	91,618.08
22	Applic	cable median family incom	e. Enter the amount fro	m Lin	e 16.		\$	62,490.00
	Applic	cation of § 1325(b)(3). Che	ck the applicable box a	nd pro	oceed as directed.		•	
23		e amount on Line 21 is mo 25(b)(3)" at the top of page				Disposable income is determ of this statement.	nined u	nder §
						or "Disposable income is no ment. Do not complete Par		
		Part IV. C	ALCULATION (OF I	DEDUCTIONS FI	ROM INCOME		
		Subpart A: D	eductions under Sta	ndar	ds of the Internal Rev	venue Service (IRS)		
24A	National Standards: food, apparel and services, housekeeping supplies, personal care, and miscellaneous. Enter in Line 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable number of persons. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. \$\$\$							1,465.00
24B	Out-of Out-of www.u who ar older. be allo you su Line c	Procket Health Care for per short Health Care for the care under 65 years of age, an (The applicable number of the swed as exemptions on your port.) Multiply Line al by Line al by Line d Lines cl and c2 to obtain	rsons under 65 years of rsons 65 years of age or lerk of the bankruptcy of denter in Line b2 the appersons in each age cate federal income tax returned b1 to obtain a total ametric b2 to obtain a total ametric sons in each age cate b2 to obtain a total ametric b2 to obtain a total ametric sons sons sons sons sons sons sons son	age, a older ourt.) pplica egory arn, plal amo	nd in Line a2 the IRS Na. (This information is ava Enter in Line b1 the app ble number of persons w is the number in that cate us the number of any ado ount for persons under 65 for persons 65 and older,	attional Standards for allable at licable number of persons the are 65 years of age or agory that would currently litional dependents whom and enter the result in and enter the result in Line		
	Persons under 65 years of age				Persons 65 years of age or older			
	a1.	Allowance per person	60	a2.	Allowance per person	144		
	b1.	Number of persons	4	b2.	Number of persons	0		
	c1.	Subtotal	240.00	c2.	Subtotal	0.00	\$	240.00
25A	Utilitie availab the nur any ade	Standards: housing and uses Standards; non-mortgage ble at www.usdoj.gov/ust/omber that would currently be ditional dependents whom	expenses for the applic or from the clerk of the b ee allowed as exemption you support.	able conkrus	county and family size. (aptcy court). The application of the following tax recovers the following tax	This information is ble family size consists of eturn, plus the number of	\$	619.00
25B	Housing available the number any addebts s	Standards: housing and ung and Utilities Standards; is one at www.usdoj.gov/ust/omber that would currently be ditional dependents whom secured by your home, as ster an amount less than zero.	mortgage/rent expense for from the clerk of the be allowed as exemption you support); enter on I ated in Line 47; subtrac	or you cankrus on y Line b	ar county and family size aptcy court) (the applicable our federal income tax rothe total of the Average	(this information is le family size consists of eturn, plus the number of Monthly Payments for any		
		IRS Housing and Utilities				1,175.00		
		Average Monthly Payment home, if any, as stated in L		y you	\$	1,295.00		
					101		IIΦ	0.00
	-	Net mortgage/rental expen			Subtract Line b		\$	0.00
26	Local a	Standards: housing and uppers not accurately compute urds, enter any additional and tion in the space below:	tilities; adjustment. If the allowance to which	you a	ontend that the process s re entitled under the IRS	et out in Lines 25A and Housing and Utilities	Þ	0.00

	Local Standards: transportation; vehicle operation/public transportation expense allowance in this category regardless of whether you pay the expenses of or regardless of whether you use public transportation.		
	Check the number of vehicles for which you pay the operating expenses or for which	h the operating expenses are	
27A	included as a contribution to your household expenses in Line 7. \square 0 \square 1 \square 2		
	If you checked 0, enter on Line 27A the "Public Transportation" amount from IRS I		
	Transportation. If you checked 1 or 2 or more, enter on Line 27A the "Operating C		
	Standards: Transportation for the applicable number of vehicles in the applicable M Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the cle	\$ 688.00	
			φ 000.00
27B	Local Standards: transportation; additional public transportation expense. If y for a vehicle and also use public transportation, and you contend that you are entitle your public transportation expenses, enter on Line 27B the "Public Transportation" Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from court.)	ed to an additional deduction for amount from the IRS Local	\$ 0.00
	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the you claim an ownership/lease expense. (You may not claim an ownership/lease expense)		
	vehicles.) $\blacksquare 1 \Box 2 \text{ or more.}$		
	Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local St		
28	(available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtrac		
	the result in Line 28. Do not enter an amount less than zero.	Elife o from Elife a and elifer	
	a. IRS Transportation Standards, Ownership Costs \$	517.00	
	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47 \$	191.00	
		e b from Line a.	\$ 326.00
29	Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local St (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract the result in Line 29. Do not enter an amount less than zero.	Line b the total of the Average	
	a. IRS Transportation Standards, Ownership Costs \$	0.00	
	Average Monthly Payment for any debts secured by Vehicle	2.22	
	b. 2, as stated in Line 47	0.00	
	c. Net ownership/lease expense for Vehicle 2 Subtract Line	e b from Line a.	\$ 0.00
30	Other Necessary Expenses: taxes. Enter the total average monthly expense that yo state, and local taxes, other than real estate and sales taxes, such as income taxes, se		
	security taxes, and Medicare taxes. Do not include real estate or sales taxes.		\$ 1,417.17
31	Other Necessary Expenses: involuntary deductions for employment. Enter the t deductions that are required for your employment, such as mandatory retirement couniform costs. Do not include discretionary amounts, such as voluntary 401(k) of the control of the con	ntributions, union dues, and	\$ 0.00
32	Other Necessary Expenses: life insurance. Enter total average monthly premiums life insurance for yourself. Do not include premiums for insurance on your dependent.		
	any other form of insurance.		\$ 0.00
33	Other Necessary Expenses: court-ordered payments. Enter the total monthly am pay pursuant to the order of a court or administrative agency, such as spousal or chi		
	include payments on past due obligations included in line 49.	ia support payments. 20 not	\$ 0.00
	include payments on past due obligations included in line 49.		\$ 0.00
2/	include payments on past due obligations included in line 49. Other Necessary Expenses: education for employment or for a physically or me	ntally challenged child. Enter	\$ 0.00
34	include payments on past due obligations included in line 49. Other Necessary Expenses: education for employment or for a physically or me the total average monthly amount that you actually expend for education that is a conseducation that is required for a physically or mentally challenged dependent child for	ntally challenged child. Enter	\$ 0.00
34	include payments on past due obligations included in line 49. Other Necessary Expenses: education for employment or for a physically or me the total average monthly amount that you actually expend for education that is a co	ntally challenged child. Enter	\$ 0.00

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B 22C (C	Official Form 22C) (Chapter 13) (04/13)		3
36	Other Necessary Expenses: health care. Enter the toth health care that is required for the health and welfare of insurance or paid by a health savings account, and that include payments for health insurance or health savings.	yourself or your dependents, that is not reimbursed by is in excess of the amount entered in Line 24B. Do not	\$ 0.00
37		your basic home telephone and cell phone service - such as nternet service-to the extent necessary for your health and	\$ 220.00
38	Total Expenses Allowed under IRS Standards. Enter	the total of Lines 24 through 37.	\$ 5,235.17
	Subpart B: Addition	onal Living Expense Deductions	
	Note: Do not include any exp	penses that you have listed in Lines 24-37	
	Health Insurance, Disability Insurance, and Health S the categories set out in lines a-c below that are reasonal dependents.	Savings Account Expenses. List the monthly expenses in bly necessary for yourself, your spouse, or your	
39	a. Health Insurance	\$ 185.85	
	b. Disability Insurance	\$ 0.00	
	c. Health Savings Account	\$ 0.00	
	Total and enter on Line 39		\$ 185.85
	If you do not actually expend this total amount, state below: \$	your actual total average monthly expenditures in the space	
40		family members. Enter the total average actual monthly e and necessary care and support of an elderly, chronically f your immediate family who is unable to pay for such	\$ 0.00
41	Protection against family violence. Enter the total aver actually incur to maintain the safety of your family unde applicable federal law. The nature of these expenses is r	er the Family Violence Prevention and Services Act or other	\$ 0.00
42	Standards for Housing and Utilities that you actually ex	mount, in excess of the allowance specified by IRS Local pend for home energy costs. You must provide your case and you must demonstrate that the additional amount	\$ 0.00
43	Education expenses for dependent children under 18 actually incur, not to exceed \$156.25 per child, for atter school by your dependent children less than 18 years of documentation of your actual expenses, and you must necessary and not already accounted for in the IRS S	adance at a private or public elementary or secondary age. You must provide your case trustee with t explain why the amount claimed is reasonable and	\$ 0.00
44	expenses exceed the combined allowances for food and	nces. (This information is available at www.usdoj.gov/ust/	\$ 0.00
45	Charitable contributions. Enter the amount reasonably contributions in the form of cash or financial instrument 170(c)(1)-(2). Do not include any amount in excess of	ts to a charitable organization as defined in 26 U.S.C. §	\$ 390.83
46	Total Additional Expense Deductions under § 707(b)	• Enter the total of Lines 39 through 45.	\$ 576.68
	·		

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			Subpart C: Deductions for De	bt l	Payment			
47	own, chec sche case,	list the name of creditor, ident k whether the payment includes duled as contractually due to ea	ns. For each of your debts that is secured ify the property securing the debt, state to a taxes or insurance. The Average Month ich Secured Creditor in the 60 months for stadditional entries on a separate page. I	he A lly P llow	Average Monthly ayment is the to ving the filing of	Payment, and tal of all amounts the bankruptcy		
		Name of Creditor	Property Securing the Debt		Average Monthly Payment	Does payment include taxes or insurance		
	a.	CHASE	2008 INFINITI QX56: TO BE PAID IN PLAN	\$	•	□yes ■no		
	b.	SPECIALIZED LOAN SERVICES	DEBTOR'S RESIDENCE: 130 OSPREY NEST CT., BLYTHEWOOD, SC 29016: ARREARS TO BE PAID IN PLAN (\$17,000), DEBTOR TO RESUME PAYMENTS MARCH 2014	\$	1,295.00	■yes □no		
				T	otal: Add Lines		\$	1,486.00
48	moto your payn sums	or vehicle, or other property ned deduction 1/60th of any amout nents listed in Line 47, in order in default that must be paid in following chart. If necessary, lis	s. If any of debts listed in Line 47 are secessary for your support or the support of at (the "cure amount") that you must pay to maintain possession of the property. To order to avoid repossession or foreclosu t additional entries on a separate page.	f you the The	or dependents, y creditor in addit cure amount wo List and total an	ou may include in tion to the uld include any y such amounts in		
		Name of Creditor	Property Securing the Debt		1/60th of	the Cure Amount		
	a.	SPECIALIZED LOAN SERVICES	DEBTOR'S RESIDENCE: 130 OSPREY NEST CT., BLYTHEWOOD, SC 29016: ARREARS TO BE PAID IN PLAI (\$17,000), DEBTOR TO RESUM PAYMENTS MARCH 2014		\$	283.33		
					l.	Total: Add Lines	\$	283.33
49	prior	ity tax, child support and alimo	claims. Enter the total amount, divided by the claims, for which you were liable at the chast hose set out in Line 33.				\$	97.85
		pter 13 administrative expensiting administrative expense.	es. Multiply the amount in Line a by the	amo	ount in Line b, a	nd enter the		
	a.	Projected average monthly		\$		655.00		
50	b.	issued by the Executive Off	district as determined under schedules fice for United States Trustees. (This www.usdoj.gov/ust/ or from the clerk of	x		8.50		
	c.		ative expense of chapter 13 case	To	otal: Multiply Li	nes a and b	\$	55.68
51	Tota	l Deductions for Debt Paymer	nt. Enter the total of Lines 47 through 5	0.			\$	1,922.86
			Subpart D: Total Deductions f	ron	n Income			
52	Tota	l of all deductions from incon	ne. Enter the total of Lines 38, 46, and 5	1.			\$	7,734.71
		Part V. DETERM	INATION OF DISPOSABLE I	NC	COME UND	ER § 1325(b)(2)	
53	Tota	l current monthly income. En	nter the amount from Line 20.				\$	7,634.84
54	payn	nents for a dependent child, rep	y average of any child support payments, orted in Part I, that you received in accorary to be expended for such child.				\$	0.00

55	wages as c	ontribution	t deductions. Enter the monthly total of ns for qualified retirement plans, as specifit plans, as specified in § 362(b)(19).				\$	178.75
56	Total of a	ll deductio	ons allowed under § 707(b)(2). Enter the	e amount from Line	e 52.		\$	7,734.71
	there is no If necessar provide yo	reasonable y, list addi our case tr	al circumstances. If there are special circums alternative, describe the special circums tional entries on a separate page. Total thrustee with documentation of these expensions that make such expense necessing.	tances and the result expenses and enterest expenses and you must	Iting expenses in liner the total in Line : t provide a detailed	nes a-c below. 57. You must		
57	Nat	ure of spec	cial circumstances	An	nount of Expense			
	a.			\$				
	b.			\$				
	c.			\$				
				То	tal: Add Lines		\$	0.00
58	Total adju	istments to	o determine disposable income. Add the	e amounts on Lines	54, 55, 56, and 57	and enter the	\$	7,913.46
50	1							070.00
59	Monthly I	Disposable	Income Under § 1325(b)(2). Subtract I	Line 58 from Line	3 and enter the resi	alt.	\$	-278.62
39	Other Exp	penses. Lis	Part VI. ADDITION It and describe any monthly expenses, not ly and that you contend should be an add-	AL EXPENSE to otherwise stated in	CLAIMS n this form, that are	required for the	\$ health	
60	Other Exp of you and 707(b)(2)(each item.	penses. List your famit (A)(ii)(I).	Part VI. ADDITIONAL at and describe any monthly expenses, not ly and that you contend should be an add. If necessary, list additional sources on a se expenses. Tription	AL EXPENSE t otherwise stated in itional deduction fi eparate page. All f	CLAIMS In this form, that are from your current me figures should reflect Mo \$ \$ \$ \$ \$	required for the	health	and welfare
	Other Exposer of you and 707(b)(2)(each item. Exposer a. b. c.	penses. List your famit (A)(ii)(I). Total the	Part VI. ADDITIONAL at and describe any monthly expenses, not ly and that you contend should be an add: If necessary, list additional sources on a se expenses. Tiption Total: Add Line	at expense to therwise stated in itional deduction freparate page. All free free free free free free free fr	CLAIMS In this form, that are from your current me figures should reflect Mo \$ \$ \$ \$	required for the onthly income u tt your average i	health	and welfare
	Other Exposer of you and 707(b)(2)(each item. Exposer a. b. c. d.	penses. List I your famit A)(ii)(I). Total the pense Description	Part VI. ADDITIONAL at and describe any monthly expenses, not ly and that you contend should be an add: If necessary, list additional sources on a se expenses. Tiption Total: Add Line	at expense to therwise stated in itional deduction for eparate page. All for the eparate page and the estate of th	CLAIMS In this form, that are from your current more income your curre	required for the onthly income uset your average in onthly Amount	health nder § monthly	and welfare y expense for